## PATENT APPLICATION FEE DETERMINATION RECORD

**Application or Docket Number** 

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			42					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			4 2 minus 20=		• 22			X\$ 9=		OR	X\$18=	396-
INDEPENDENT CLAIMS			3 mir	nus 3 =	* \$			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=	<del> </del>	OR	+270=	
* If the difference in column 1 is less that				than zero, enter "0" in column 2			i	TOTAL		OR	TOTAL	1100
CLAIMS AS AMENDED - PART II								OTHER THAN			-	
		(Column 1)		(Colu		(Column 3) SMAL			ENTITY	OR	SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM	W + M	<b>J</b>	+135=		OR	+270=	
	(Column 1) (Column 2) (Column 3)									OR	TOTAL ADDIT. FEE	
										•	ADDII. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	$\Big]\Big[$	RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CL AIM	]=	┨╏	X40=		OR	X80=	
<b>L</b>	FIRST PRESE	NTATION OF MI	JUITLE DEF	ENDEN	CLAIIVI		۱ ۲	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		_										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	į
	Independent	*	Minus	***		=	╽╽	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEN				T CLAIM		J ∤			'		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+270=	
**	** If the entry in column 1 is less than the entry in column 2, write 10 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" IT This space is less than 3, enter "3."  The "Highest Number Previously Paid For" IT This space is less than 3, enter "3."											